

<b>NOTICE OF APPEAL FROM THE EXAMINER TO THE BOARD OF PATENT APPEALS AND INTERFERENCES</b>		Docket Number (Optional) C1040.70006US00	
<p>In re Application of Michael J. McCluskie et al.</p> <p>Application Number 09/316,199-Conf. #7506</p> <p>Filed May 21, 1999</p> <p>For METHODS AND PRODUCTS FOR INDUCING MUCOSAL IMMUNITY</p> <p>Art Unit 1633</p> <p>Examiner I. Popa</p>			
<p>Applicant hereby <b>appeals</b> to the Board of Patent Appeals and Interferences from the last decision of the examiner.</p> <p>The fee for this Notice of Appeal is (37 CFR 41.20(b)(1)) <span style="float: right;">\$ 620.00</span></p> <p><input type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27. Therefore, the fee shown above is reduced by half, and the resulting fee is: <span style="float: right;">\$ _____</span></p> <p><input type="checkbox"/> A check in the amount of the fee is enclosed.</p> <p><input checked="" type="checkbox"/> Payment by credit card. <del>Form PTO-2038 is attached.</del></p> <p><input type="checkbox"/> The Director has already been authorized to charge fees in this application to a Deposit Account.</p> <p><input checked="" type="checkbox"/> The Director is hereby authorized to charge any fees which may be required, or credit any overpayment to Deposit Account No. <u>23/2825</u>.</p> <p><input type="checkbox"/> A petition for an extension of time under 37 CFR 1.136(a) (PTO/SB/22) is enclosed.</p> <p><b>WARNING: INFORMATION ON THIS FORM MAY BECOME PUBLIC. CREDIT CARD INFORMATION SHOULD NOT BE INCLUDED ON THIS FORM. PROVIDE CREDIT CARD INFORMATION AND AUTHORIZATION ON PTO-2038.</b></p> <p>I am the</p> <p><input type="checkbox"/> applicant /inventor. <span style="float: right;">_____/Maria A. Trevisan/</span></p> <p><input type="checkbox"/> assignee of record of the entire interest. <span style="float: right;">_____/Signature</span></p> <p>See 37 CFR 3.71. Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96) <span style="float: right;">_____/Maria A. Trevisan</span></p> <p><input checked="" type="checkbox"/> attorney or agent of record. <span style="float: right;">_____/Typed or printed name</span></p> <p>Registration number <u>48,207</u> <span style="float: right;">_____/617.646.8000</span></p> <p><input type="checkbox"/> attorney or agent acting under 37 CFR 1.34. <span style="float: right;">_____/Telephone number</span></p> <p>Registration number if acting under 37 CFR 1.34. <span style="float: right;">_____/August 21, 2012</span></p> <p style="text-align: right;">_____/Date</p> <p>NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below*.</p> <p><input type="checkbox"/> *Total of _____ forms are submitted.</p>			

<b>Certificate of Electronic Filing Under 37 CFR 1.8</b> I hereby certify that this paper (along with any paper referred to as being attached or enclosed) is being transmitted via the Office electronic filing system in accordance with 37 CFR § 1.6(a)(4).	
Dated: August 21, 2012	Electronic Signature for Nicole Milette Lapomardo: /Nicole Milette Lapomardo/